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Draft country programme document for Bosnia and Herzegovina
Corrigendum

The first sentence of paragraph 2 *should read*: The State of Bosnia and Herzegovina, in its current structure defined by the 1995 Dayton Peace Agreement, has limited central power, with most government functions delegated to two entities: the Republika Srpska and the Federation of Bosnia and Herzegovina. Brčko District is a third administrative unit, which has been under international administration.

The last sentence of paragraph 2 *should read*: Yet it faces obstacles that slow progress in economic and social development, including in the areas of health and education.

The last sentence of paragraph 3 *should be deleted.*

The second sentence of paragraph 5 *should read*: According to the 2007 labour force survey, about 38 per cent of the population has left the country.

The third sentence of paragraph 5 *should read*: The fertility rate is low, and, as a result, the population of Bosnia and Herzegovina is ageing rapidly.

The fourth sentence of paragraph 5 *should be deleted.*

The first sentence of paragraph 8 *should read*: The health status of the population is generally poor, and morbidity is high, as a result of the previous conflict as well as lifestyle factors.

The second sentence of paragraph 8 *should be deleted.*

The last sentence of paragraph 8 *should read*: Although HIV prevalence is considered to be low, the actual prevalence rate is not known, due to the lack of nationwide, systematic surveillance.

The first sentence of paragraph 9 *should read*: Gender-based discrimination is present in Bosnian society.

The second sentence of paragraph 9 *should read*: Three issues are of particular concern: (a) unequal representation of women in political processes; (b) access to employment; and (c) gender-based violence.

The fifth, sixth and seventh sentences of paragraph 11 *should read*: The educational system of Bosnia and Herzegovina incorporates elements of health education into various subjects. However, there is no specific subject on health education in the school curriculum. Under these circumstances, UNFPA supported peer education and counselling for youth on sexual and reproductive health.

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